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ABSTRACT

To determine which children in the Head Start program may have vision problems, Head Start teachers and staff do vision "screening." This booklet demonstrates how to do the screening using the Snellen "E Chart." Trouble signs that the test administrator should be aware of are listed, and vision scores are explained simply. Amblyopia is defined, and some indications of its presence are listed. Visual ability checklists are included. (RC)

U.S. DEPARTMENT OF HEALTH
EDUCATION & WELFARE
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VISION SCREENING FOR HEAD STARTERS

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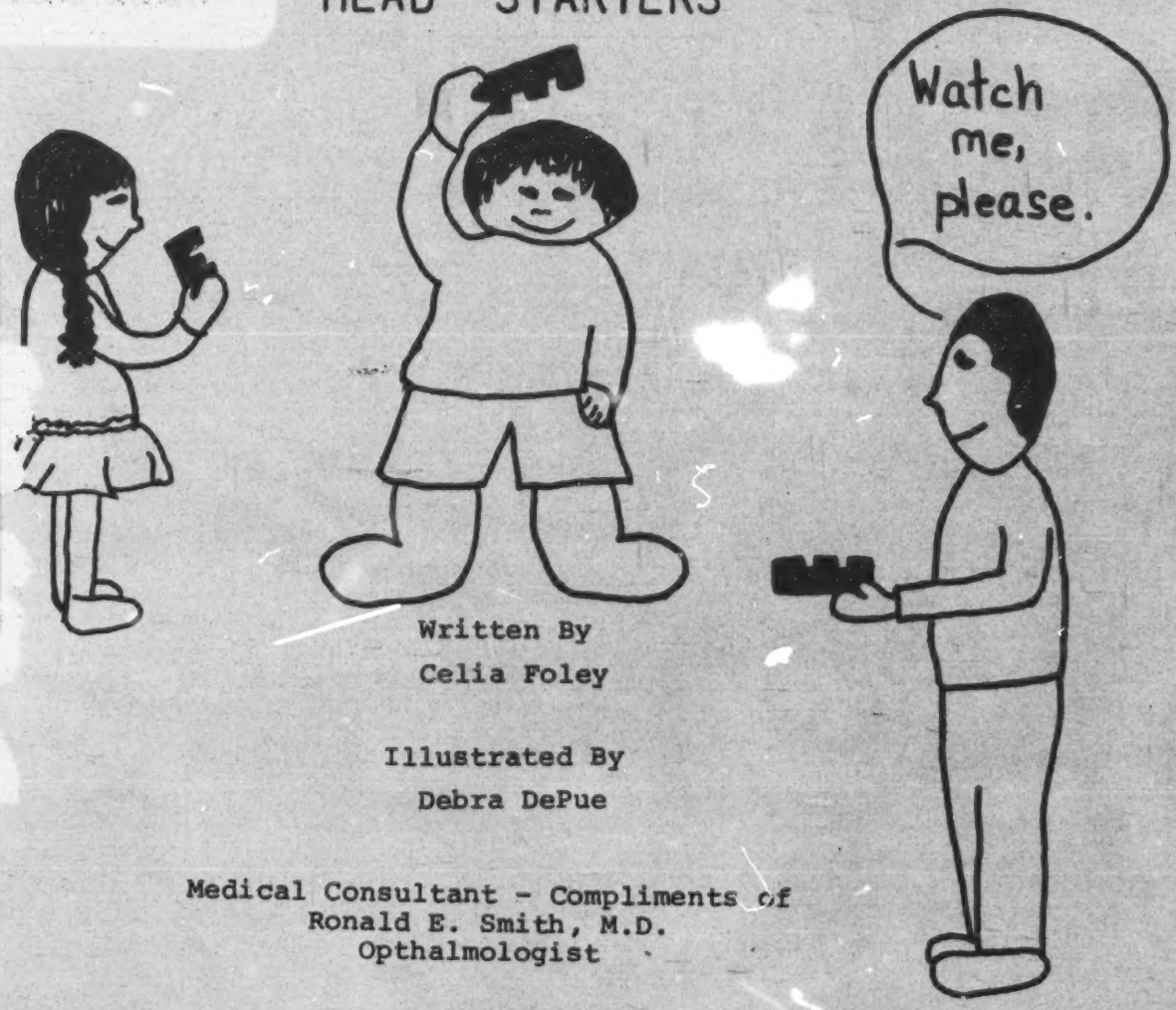

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Helen D. Beirne, Ph.D., Project Director

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Eyesight is important to all of us. It is one of the major ways we learn and appreciate the world around us.

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Did you know that...

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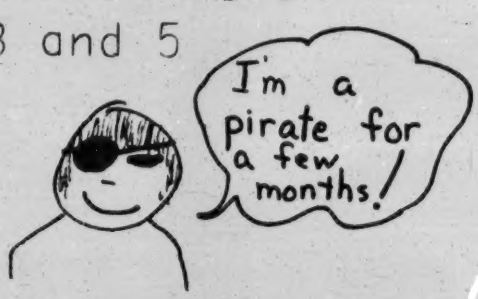
...the way a child sees is very important in learning even before he starts to read?

...many vision problems in children between the ages of 3 and 5 can be corrected?



...some of the visual problems which can be helped at a very early age cannot be helped when the child grows up?

So it is important to make sure that the Head Start children have the ability to see well, and to find out who may need help.

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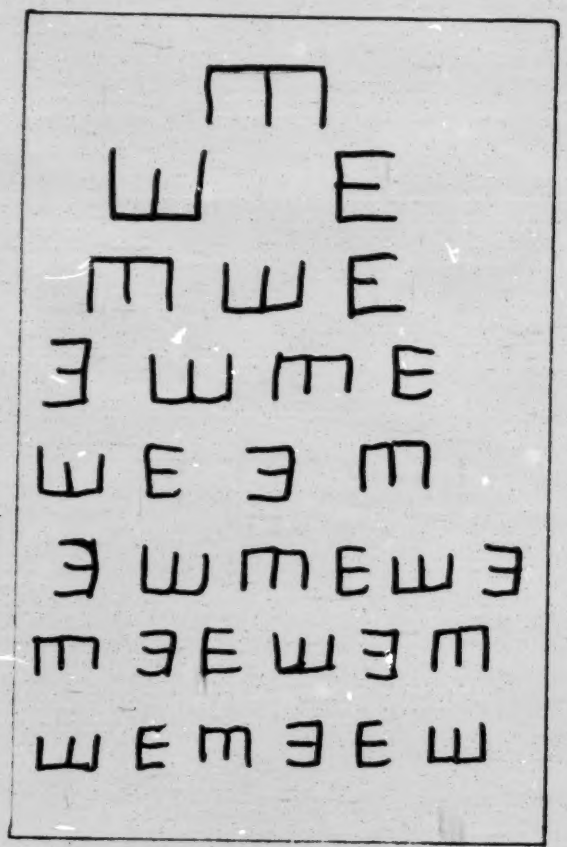
To find out which Head Starters may have vision problems, Head Start teachers and staff do vision "screening". Each child is given a test to check his eyesight. The teacher also watches the child for signs of problems.

This booklet shows how to do vision screening using the Snellen "E chart". There are other charts used for testing vision, but this is the easiest for young children to do.



The E Chart

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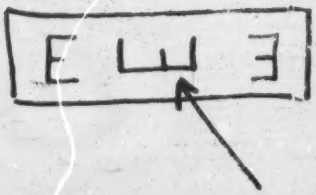
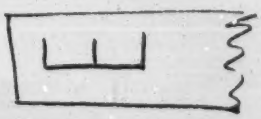
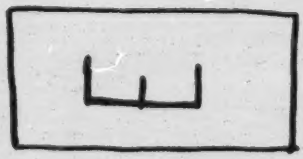
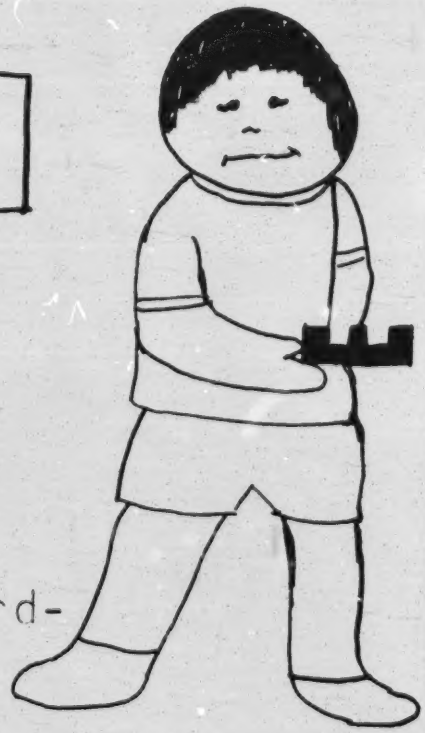


To take the "E" test, the children must know how to show which way the "E" is pointing.



They may learn to hold three fingers or a hand pointing the right way.





Or they may want to hold a cardboard "E" and make it go the right way.

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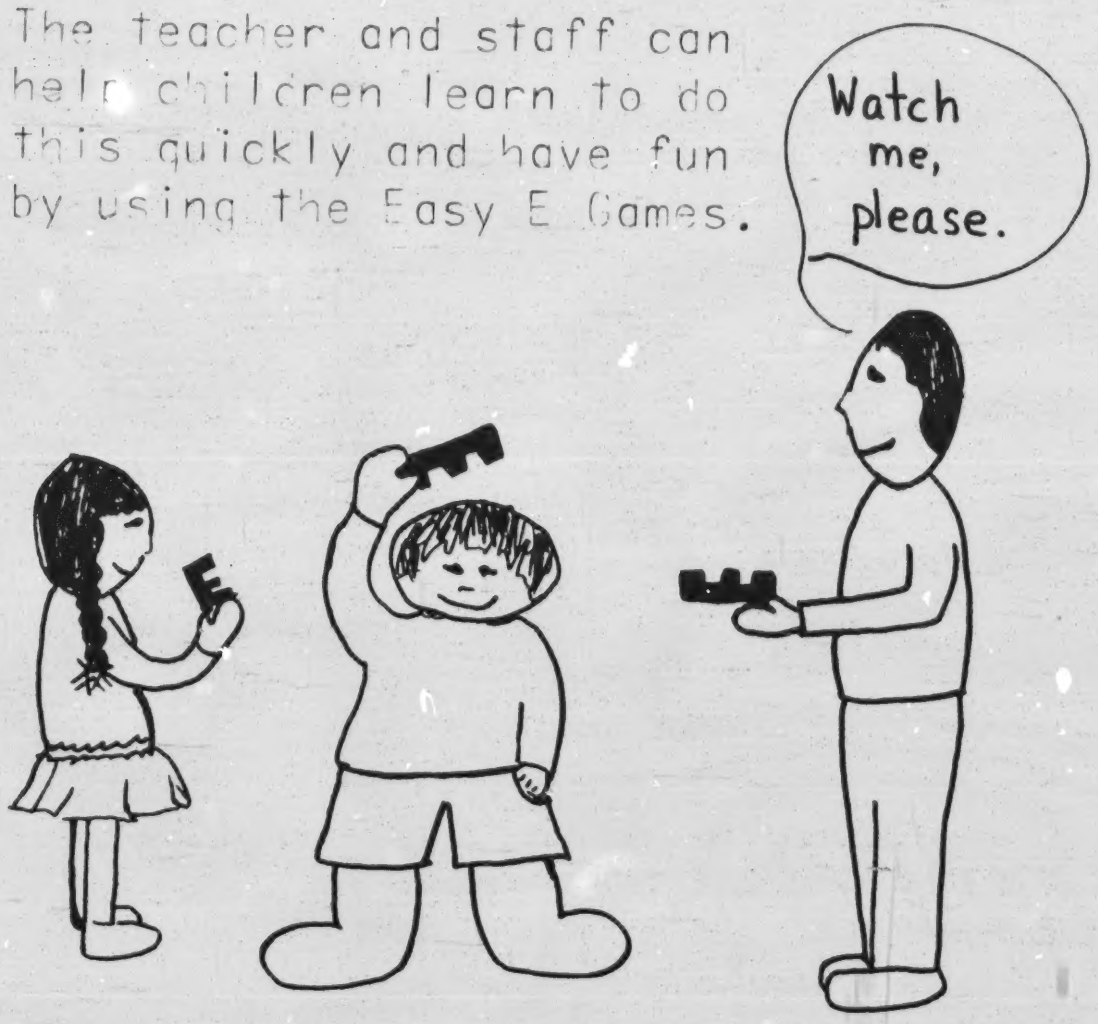
The teacher and staff can help children learn to do this quickly and have fun by using the Easy E Games.



Remember: It is best to work with a <u>small</u> group of children.

Some children may need individual help, especially if they have eye-hand problems.

EASY E GAMES

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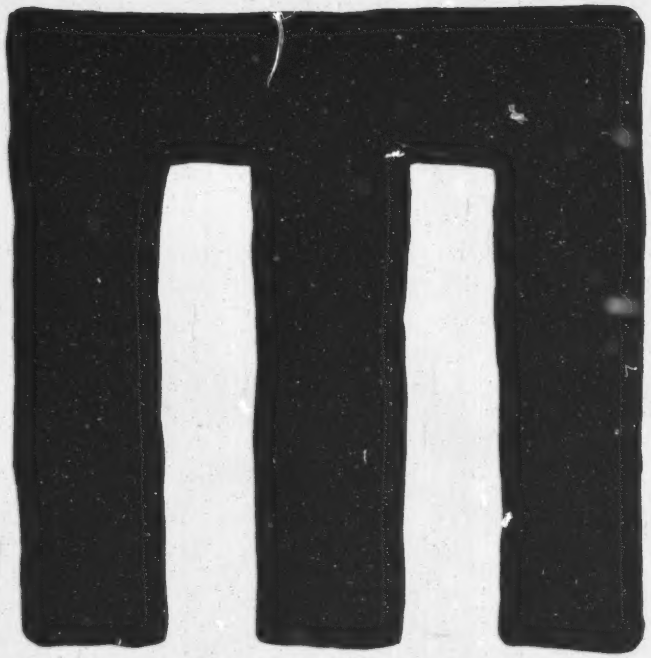
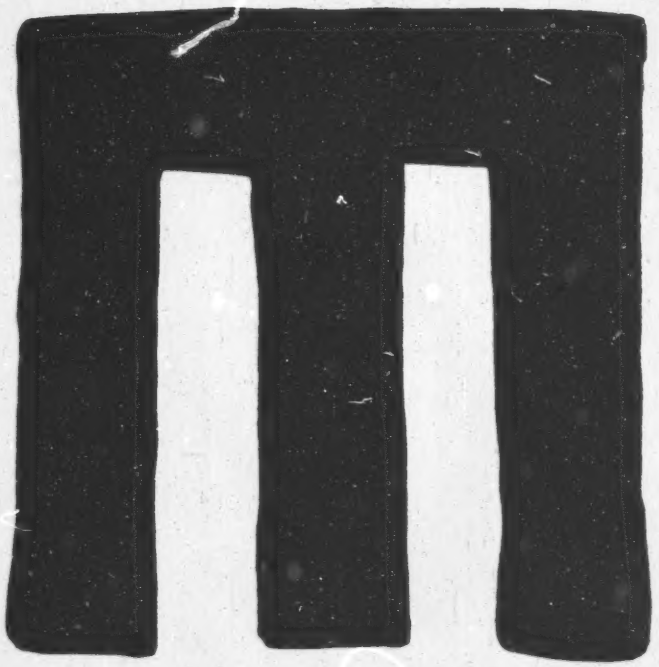
YOU NEED:

1. E cutouts from black construction paper.

2. Fingers.





Cut out and trace on heavy black paper
for easy E games.

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Simon Says

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1. Someone is Simon--the leader. Every player has an E to hold.

2. The leader (teacher at first) says: "Simon says do this"---and points the "legs" up, down, right or left.

3. Everyone points his E the same way.

4. When leader says: "Do this"---without saying "Simon says"---no one should move his card the same way.

The Finger Game

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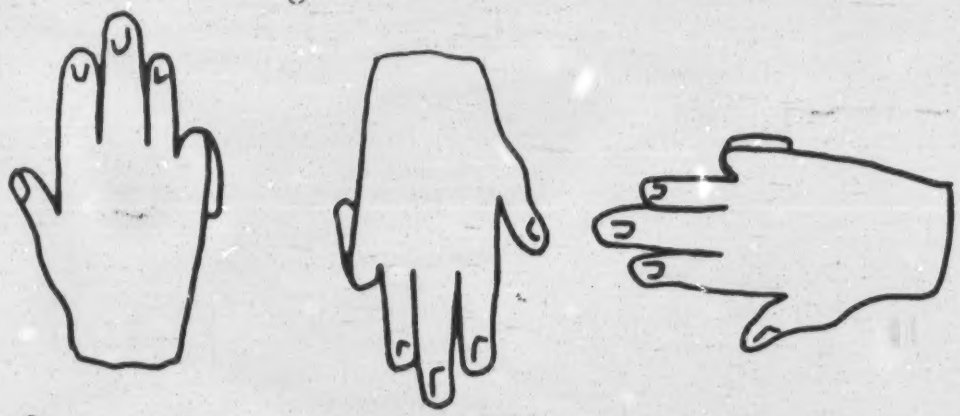
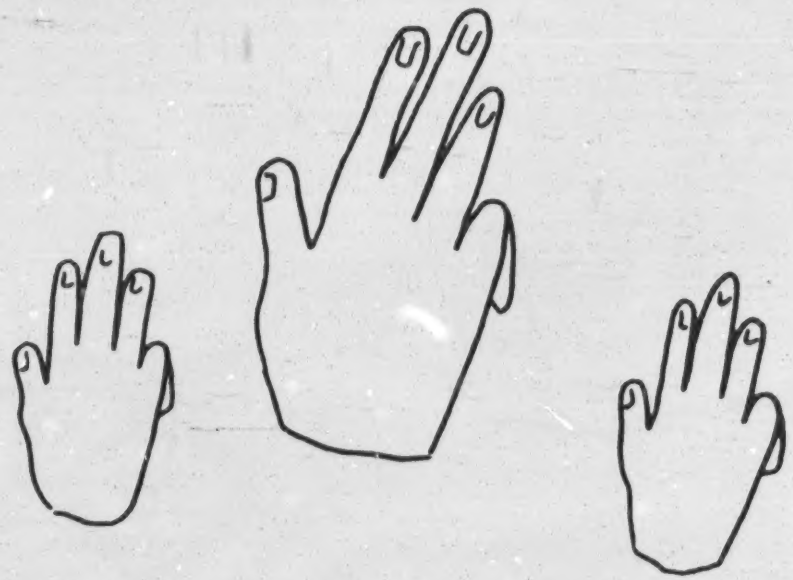
1. Show the children how they can hold their fingers to look like an "E."



2. See if they can make their fingers point the same way that your's point--up, down, right or left. (They don't have to say it.)



If a child has trouble with the Finger game, he may learn by "matching."

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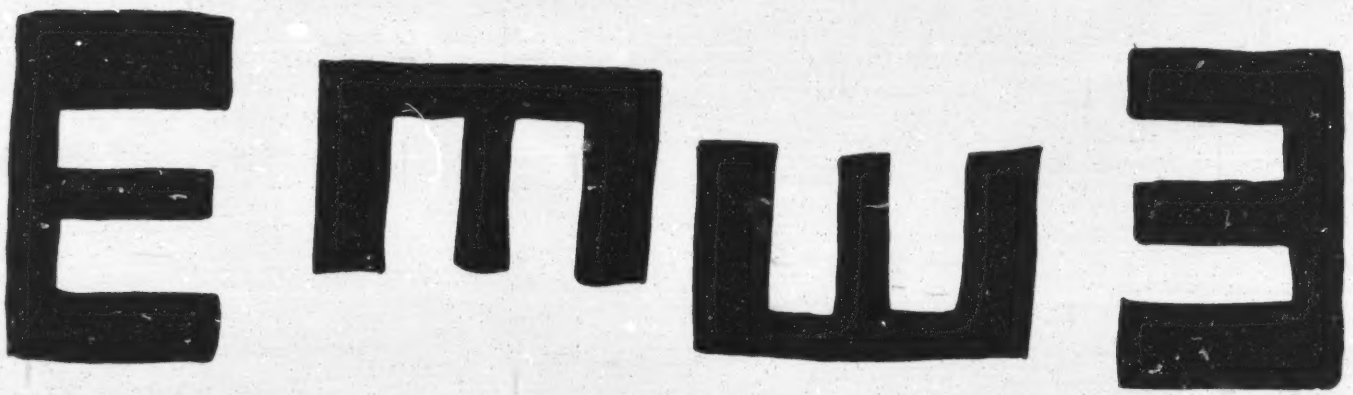
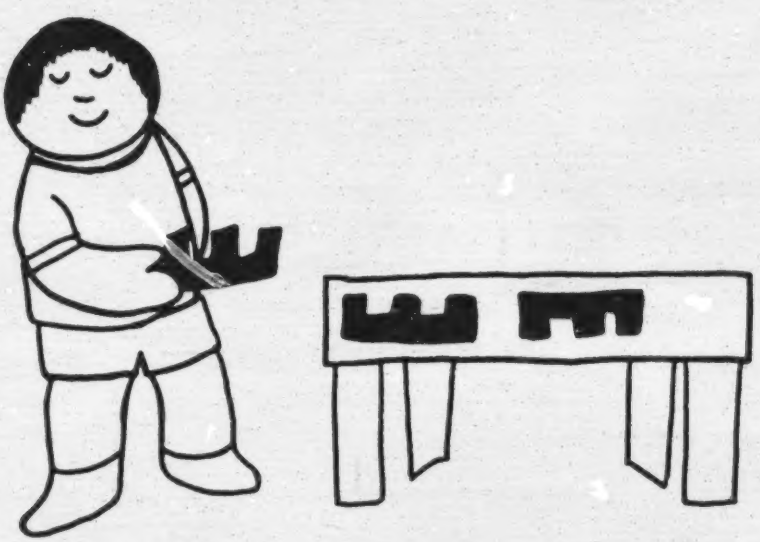
1. Put cut-out Es on a table going up, down, right and left.



2. The child tries to put his cut-out E right on top of one. Try this with all directions.



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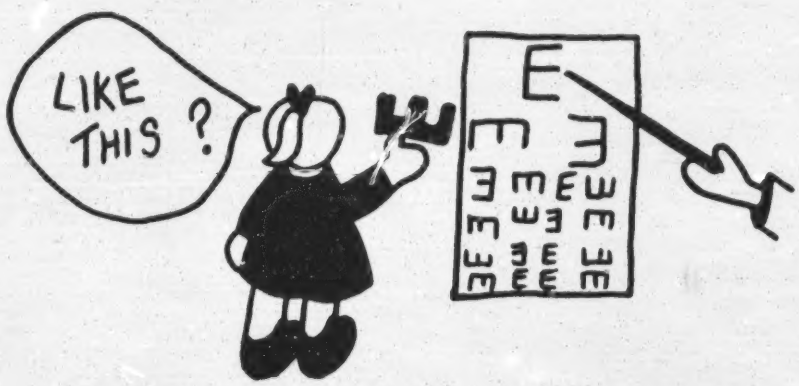
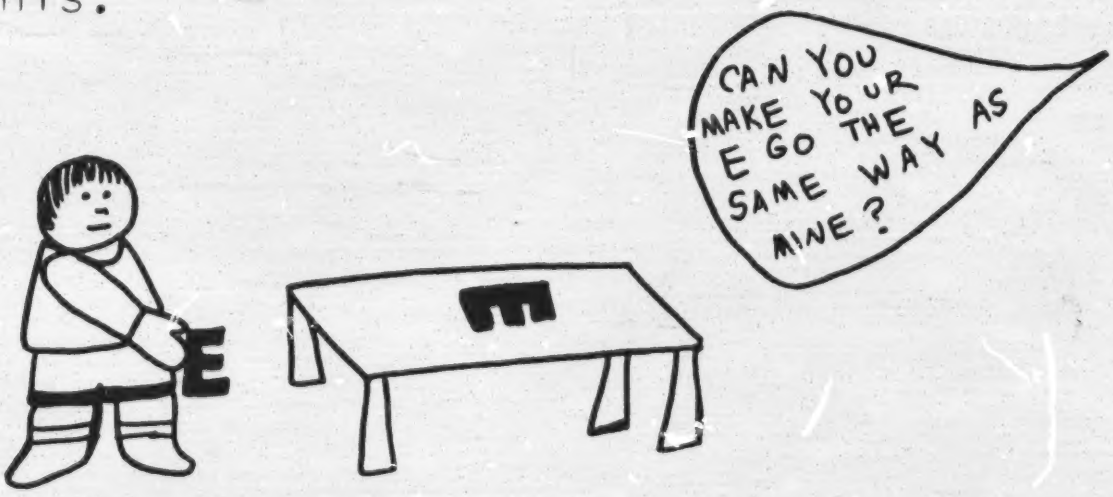
They may get very confused with the Snellen "E chart" for vision screening if they don't have a chance to practice first....



Eye-hand matching can be hard for any child. Children with visual motor problems will need some <u>special</u> help with this.



You can hang an E game on the wall, too. Hang one E in each direction. The child matches another E (hanging on a hook) with the wall E's. This can be an "anytime" thing, too.

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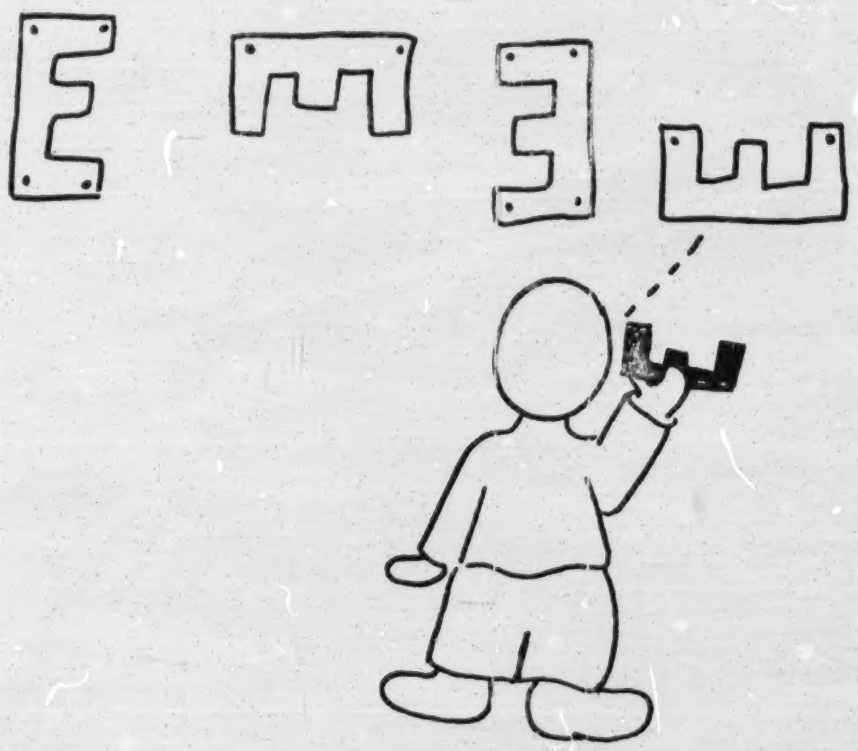

CAUTION: It is not so good to hang the whole E chart. The children may remember what they see up close. We want to check VISION, not memory.

When the children know how to play the E games, it is time to test.

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VISION LIST
Using The E Chart

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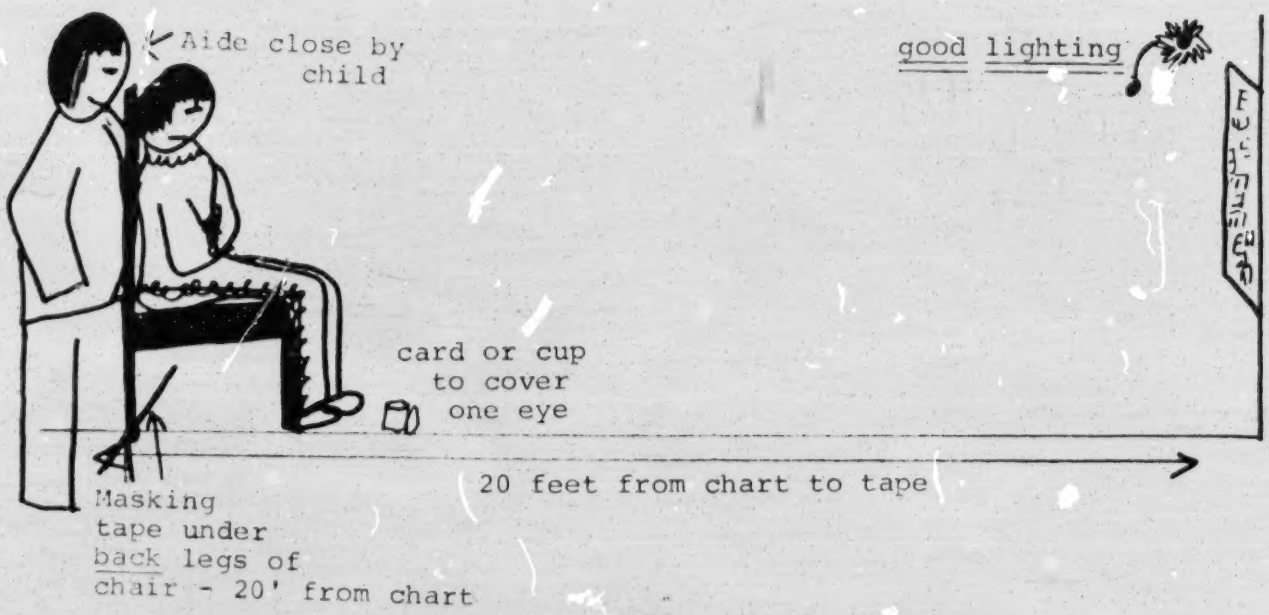
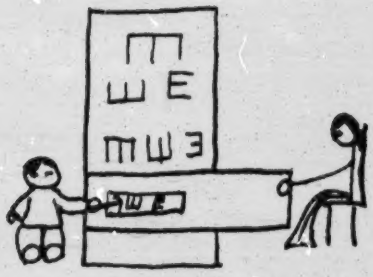
1. Is the room ready?


Aide close by child
good lighting
Chart at Child's Eye Level
card or cup to cover one eye
20 feet from chart to tape
Masking tape under back legs of chair - 20' from chart

2. Are the testers ready? For fastest results:
   - One person should hold the window card.
   - One person should point to the E and watch the child.
   - One person should stay close to the child.



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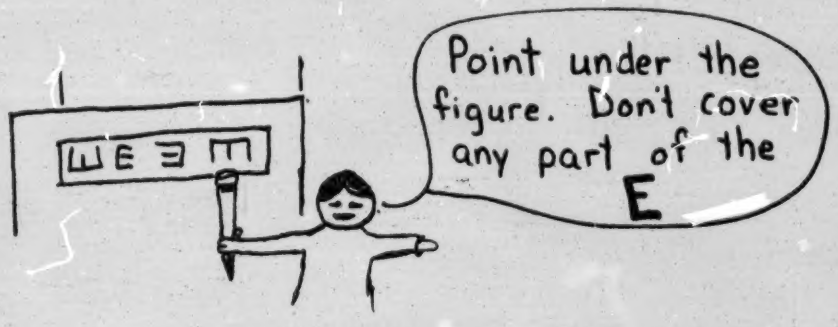
3. A "window card" helps direct the child's attention to the right line.



4. The eraser end of a pencil may be used for painting.

5. Test both eyes first.
   Then the right eye.
   Then the left eye.

You may use a piece of paper, a patch, or a small "throw-away" paper cup to cover one eye. Make <u>sure</u> the child cannot "peek".

6. If a child wears glasses, check with glasses,- then without glasses.

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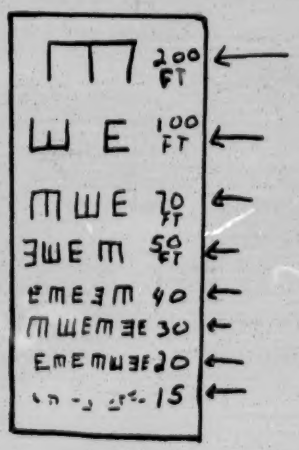
7. Start at the top of the "E chart". Move down one line at a time. Move quickly from line to line to keep the child's attention.

8. The child "passes" the line when he shows he sees <u>ONE MORE THAN HALF</u> of the E's on the line.

9. Record the score.
   The score is taken from the last line "passed". If it is the 50 ft. line, the score is 20/50. If 30 ft., the score is 20/30. If 20 ft., the score is 20/20.



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To make your own "WINDOW CARD"-

Paste Page on heavy paper or cardboard.

Cut out inside black lines. (Cut out directions!)

THE WINDOW CARD MUST BE WHITE TO USE WITH EYE CHART.

TO USE:

WATCH for these signs
during the vision test

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1. Keeps moving head forward.

2. Tilting head.

3. Eyes watering.

4. Frowning-making faces.

5. Puckering the face.

6. Closing one eye during test of both eyes.

7. Constant blinking.

If this happens, write the behavior on the test.

These signs show that the child must strain to see.

Both 20/40
Rt. 20/30
Lt. 20/40
Blinking after 20/70 line.

WHAT DO VISION SCORES MEAN?

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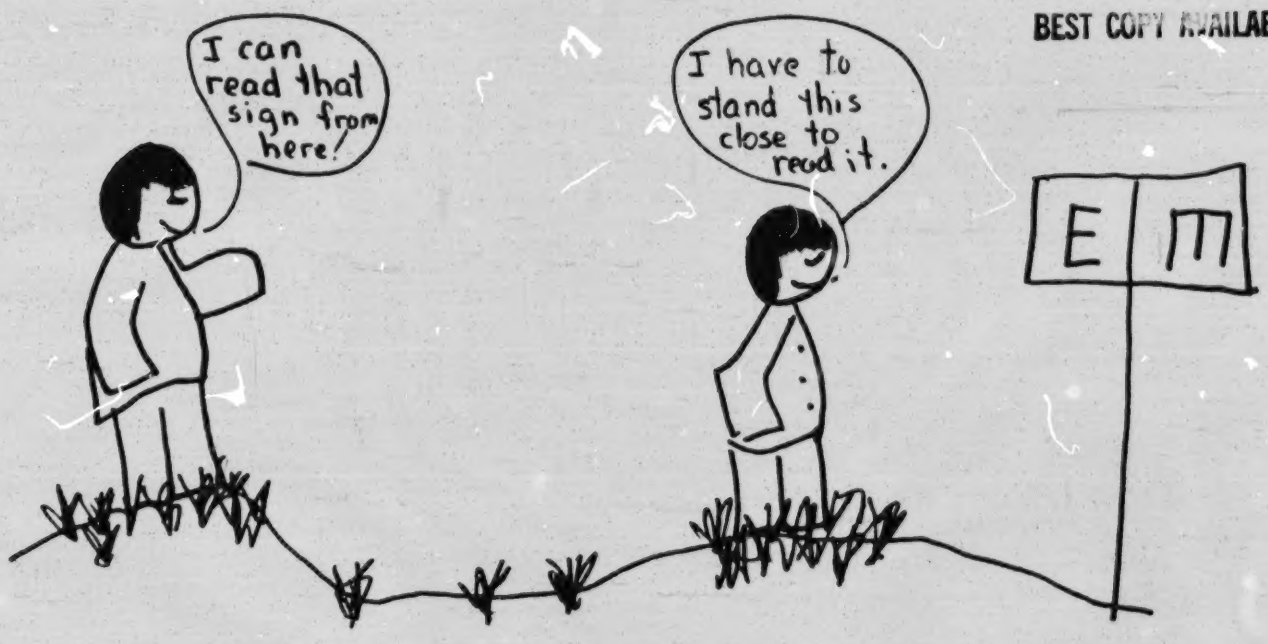

Normal vision for adults is 20/20.

20/(20)→ This is the side that changes.

If a person has a score of 20/70, he must be as close as 20 feet to read the 70 foot line. A person with good vision (20/20) can read the same line from 70 feet away.

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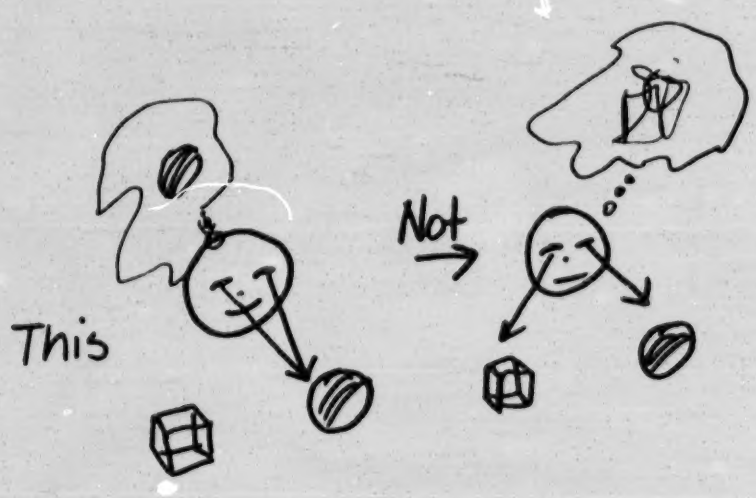
Children are not born with adult visual ability. "Acuity"(sharpness) develops in the first seven years.
The preschool years are important times for learning to use the two eyes to see one image, not two. This is called fusion.



These scores may be expected, and are normal during the developmental periods.
For 3-4 years old: 20/30 or 20/40
For 5 years old: 20/20 or 20/30

Assistance and correction of problems found at these early ages may help children in developing normal fusion using two eyes as one.

AMBLYOPIA

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-This is a vision problem caused by muscle imbalance of the eye.

-You may be able to see this in a child right away with no testing-

The child's eyes may be "crossed", most often when he is tired.

One eye may wander when the other eye focuses on an object. It may go "out"- away from the nose, or "in", towards the nose.

It is a good idea to check for this, even if you do not notice it in school. It may only be a slight movement, hard to see without looking for it.

"The cover test may be used to test for this problem."

THE "COVER" TEST
(for muscle imbalance)

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1. Sit at child's level.
   The child should stand right in front of you.

2. Tap the end of your nose with one finger of one hand
   You say: "Look at my nose- watch my nose... look.."

3. Move your other hand, or thumb, up and down in front of <u>one</u> eye of the child-
   If that eye moves, and the other is looking at your nose- write down what you saw with the test scores for the E chart.

4. Test the other eye the same way.
   *You may want to hold a small picture on your nose to keep the child's attention.

How to write it down: Examples:
cover: right eye turns in or
cover: left eye turns out or
cover: o.k.

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WHAT TO DO WITH VISION SCORES??

Vision scores may be recorded on the VASC or on the Visual Ability Check sheets if available.

The Vision and VASC scores should be mailed in together to

VASC and Vision
Grant Office
3710 East 20th Avenue
Anchorage, Alaska 99504

This office will notify health aides, doctors and Public Health nurses of the children who should be seen.
The forms will be sent back to you by the Field Training Supervisors.
Scores should also be recorded on each child's cumulative record.

There will be comments and recommendations on the sheets. Teachers will want to read these, and know who should see a doctor or nurse or specialist.
Scores should also be recorded on each child's cumulative record.

VASC

A program of free hearing and vision testing sponsored jointly by Alaska Department of Health, and the Easter Seal Society for Alaska Crippled Children and Adults (the ACCA)

LOCAL AGENCY YOUR HEAD START CENTER

TESTING DATE 10-3 19 73 TESTING LOCATION CLINIC (WHERE YOU TEST)

CHILD'S NAME KID (LAST) GOOD (FIRST) LITTLE (MIDDLE)

DATE OF BIRTH 1-2-69 MALE ☐ FEMALE ☐

PARENT Art and Bene KID

ADDRESS YOUR TOWN

FAMILY PHYSICIAN OR CLINIC

VISION TESTS GIVEN BY YOUR NAME HEARING TESTS GIVEN BY YOUR NAME

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ZA - 4T VASC AUDIOMETER RECORD

DIRECTIONS: CIRCLE **RIGHT** OR **LEFT** FOR EACH SERIES USED.

SCORE CORRECT RESPONSE + INCORRECT RESPONSE − NO RESPONSE O

DB LEVEL	SERIES	RIGHT	LEFT	SERIES	RIGHT	LEFT	SERIES	RIGHT	LEFT
51	Bird Sound			Bird Sound			Bird Sound			Bird Sound		
51	Lion Roar			Lion Roar			Lion Roar			Lion Roar		
51	Ice Cream			Cowboy			Snowman			Toothbrush		
47	Bird Sound			Bird Sound			Bird Sound			Bird Sound		
47	Airplane			Sandbox			Cupcake			Firetruck		
43	Highchair			Wristwatch			Sailboat			Snowman		
39	Wristwatch			Sailboat			Toothbrush			Bathtub		
35	Bathtub			Airplane			Sandbox			Sailboat		
31	Lion Roar			Lion Roar			Lion Roar			Cupcake		
31	Cowboy			Cupcake			Firetruck			Lion Roar		
27	Firetruck			Ice Cream			Cowboy			Airplane		
23	Bird Sound			Snowman			Bird Sound			Highchair		
23	Sandbox			Bird Sound			Bathtub			Bird Sound		
19	Toothbrush			Highchair			Wristwatch			Ice Cream		
15	Sailboat			Firetruck			Airplane			Cowboy		
15	Bird Sound			Toothbrush			Highchair			Sandbox		
15	Snowman			Bird Sound			Bird Sound			Wristwatch		
15	Cupcake			Bathtub			Ice Cream			Bird Sound		

SAMPLE

SCORE RIGHT _____ DB LEFT _____ DB NOTE: IF HEARING IS RESCREENED AT A LATER DATE, A NEW FORM SHOULD BE USED AND ATTACHED TO THIS COPY.

INDICATE HIGHEST DB VALUE OF BIRD SOUND MISSED _____ DB

WAS A CONFIRMATORY THRESHOLD TEST DONE? YES ☐ NO ☐ IF SO, ATTACH AUDIOGRAM

VISUAL ACUITY

	BOTH EYES	RIGHT EYE	LEFT EYE
WITHOUT GLASSES	20/50	20/50	20/70
WITH GLASSES			

DO EYES CROSS OR TURN OUT AT ANY TIME? Doesn't left eye turns out. SEEMS to see

HAS THIS CHILD RECEIVED EYE CARE? YES ☐ NO ☒ IF SO, PHYSICIAN'S NAME OR CLINIC

HAS THIS CHILD RECEIVED EAR CARE? YES ☐ NO ☐ IF SO, PHYSICIAN'S NAME

IS THERE DIFFICULTY UNDERSTANDING THE CHILD'S SPEECH

WAS THIS CHILD REFERRED FOR FURTHER EXAMINATION? YES ☐ NO ☐ IF SO, TO ETC.

TO WHOM WAS REFERRAL MADE?

I agree to allow all the information from the screening test to be entered into the Registry of Human Impairments of the State of Alaska.

PARENT'S SIGNATURE

REMARKS

REVISED 1970 FORM FOR USE

ALASKA DEPT. OF HEALTH COPY

VISUAL ABILITY CHECK

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Child's Name_____

Birthdate_____

Date of Visual Screening_____

Yes	No		
___	___	1.	Does the child complain of eyes that are itchy, burn or feel scratchy?
___	___	2.	Does the child have inflamed, red incrusted, or watery eyes?
___	___	3.	Does the child blink more than usual?
___	___	4.	Do eyes turn in or up?
___	___	5.	Does child complain of headaches, dizziness, or nausea?
___	___	6.	Does child stumble over small objects?
___	___	7.	Is child over sensitive to light?
___	___	8.	Is child frightened by noises of unknown origin?

A child with good vision scores may still have a problem. "Yes" to any of these questions may mean that a child should see the eye doctor.

9. Score on Vision Screening

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With glasses		Without glasses	
Both eyes	_____	Both eyes	_____
Right Eye	_____	Right eye	_____
Left Eye	_____	Left eye	_____

(See Head Start records)

\+ Yes
\- No
o No response

____10. Looks at objects approximately 14 inches from eyes.
____11. Can see pictures or words on the blackboard without squinting or moving closer.
____12. Watches activities around him.
____13. Can copy hand motions watching teacher's hand at 10 feet

The scores on vision screening are important The questions on this page tell you other problems a child may have.

VISION CHECKLIST

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1. Good light for chart?
2. Chart 20' feet from chair or tape?
3. Eye covers ready?
4. Children know E Games?
5. One person to point ready?
6. One person to hold window card?
7. One person to sit with child and record scores?
8. Both eyes checked?
9. Right eye checked?
10. Left eye checked?
11. Blinking or other straining recorded?
12. Cover test done?
13. Send results in?

Dont forget--First: Staff vision checks